

State: FLORIDA

Citation	Condition or Requirement
42 CFR 435.914	11. Effective Date of Eligibility  a. Groups Other Than Qualified Medicare Beneficiaries  (1) For the prospective period.  Coverage is available for the full month if the following individuals are eligible at any time during the month.  <u>X</u> Aged, blind, disabled. <u>X</u> AFDC-related.  Coverage is available only for the period during the month for which the following individuals meet the eligibility requirements.  Medically Needy recipients must incur medical expenses in order to become eligible.  <u>X</u> Aged, blind, disabled. <u>X</u> AFDC-related.  (2) For the retroactive period.  Coverage is available for three months before the date of application if the following individuals would have been eligible had they applied:  <u>    </u> Aged, blind, disabled. <u>    </u> AFDC-related.  Coverage is available beginning the first day of the third month before the date of application if the following individuals would have been eligible at any time during that month, had they applied..  <u>X</u> Aged, blind, disabled. <u>X</u> AFDC-related.

TN No. 91-39  
Supersedes  
TN No. 90-03

Approval Date SEP 8 1992

Effective Date 10/1/91

HCFA ID: 7985E

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: FLORIDA

ELIGIBILITY CONDITIONS AND REQUIREMENTS

Citation(s)	Condition or Requirement
1920(b)(1) of the Act	<u>X</u> (3) For a presumptive eligibility for pregnant women only.  Coverage is available for ambulatory prenatal care for the period that begins on the day a qualified provider determines that a woman meets any of the income eligibility levels specified in ATTACHMENT 2.6-A of this approved plan. If the woman files an application for Medicaid by the last day of the month following the month in which the qualified provider made the determination of presumptive eligibility, the period ends on the day that the State agency makes the determination of eligibility based on that application. If the woman does not file an application for Medicaid by the last day of the month following the month in which the qualified provider made the determination, the period ends on that last day.
1902(e)(8) and 1905(a) of the Act	<u>X</u> b. For qualified Medicare beneficiaries defined in section 1905(p)(1) of the Act coverage is available beginning with the first day of the month after the month in which the individual is first determined to be a qualified Medicare beneficiary under section 1905(p)(1). The eligibility determination is valid for--  <u>X</u> 12 months  ____ 6 months  ____ months (no less than 6 months and no more than 12 months)

TN No. 92-23  
Supersedes  
TN No. 91-39

Approval Date

OCT 13 1992

Effective Date 4/1/92

FLORIDA

Citation	Condition or Requirement
1902(a)(51)(B) and 1902(f) of the Act	12. Transfer of Resources - Categorically and Medically Needy, Qualified Medicare Beneficiaries, and Qualified Disabled and Working Individuals  The agency complies with the provisions of section 1917 of the Act with respect to the transfer of resources.

TN No. 91-39  
Supersedes  
TN No. NEW

Approval Date SEP 18 1992

Effective Date 10/1/91

HCFA ID: 7985E

Revised Submission 6/26/92

FLORIDA

Citation	Condition or Requirement
Section 13611 OBRA 1993	The agency complies with the provisions of section 13611 of OBRA 1993 with respect to the transfer of income and assets and the exclusion of income trusts.

TN No. 93-59  
Supersedes  
TN No. NEW

**FEB 18 1994**  
Approval \_\_\_\_\_

Effective 10/1/93

FLORIDA

Citation	Condition or Requirement
Section 13611 OBRA 1993	The agency complies with the provisions of section 13612 of OBRA 1993 with respect to recovering the Medicaid costs of long term care from the estates of recipients. Procedures have been established to waive recovery due to undue hardship.

TN No. 93-60  
Supersedes  
TN No. NEW

Approval 2-9-94

Effective 10/1/93

STATE FLORIDA

Citation

Condition or Requirement

c. For Qualified Disabled Working Individuals (QDWI's) defined in Section 1905(s) of the Act, coverage is available beginning with the first month the individual is determined to be a Disabled Working Individual (DWI) by the Social Security Administration but no more than three months prior to filing a QDWI application with the Medicaid agency. The eligibility determination is valid for--

  X   12 months

       6 months

              months (no less than 6 months and no more than 12 months)

*Material moved to 12a  
(PM 91-4)  
\* See attached documentation*

*2.6-A, Page 23a  
material now on page 12  
\* 12a  
(92-23)*

*(Supplement Pa to 2.6-A)*

TN No. 90-40  
Supersedes  
N No. NEW

Approval Date 10-11-90 Effective Date 7/1/90

State: FLORIDA

Citation

Condition or Requirement

*SPA's replacing  
2.6-A, Page 23a*

If an individual receives a title II benefit, any amounts attributable to the most recent increase in the monthly insurance benefit as a result of a title II COLA is not counted as income during a "transition period" beginning with January, when the title II benefit for December is received, and ending with the last day of the month following the month of publication of the revised annual Federal poverty level.

For individuals with title II income, the revised poverty levels are not effective until the first day of the month following the end of the transition period.

For individuals not receiving title II income, the revised poverty levels are effective no later than the date of publication.

1905(s) of the Act

- g. (1) Qualified disabled and working individuals.

In determining countable income for qualified disabled and working individuals covered under 1902(a)(10)(E)(ii) of the Act, the methods of the SSI program are used.

1905(p) of the Act

- (2) Specified low-income Medicare beneficiaries.

In determining countable income for specified low-income Medicare beneficiaries covered under 1902(a)(10)(E)(iii) of the Act, the same method as in f. is used.

TN No. 93-08

Supersedes

TN No. 92-23

Approval Date

MAY 7 1993

Effective Date 1/1/93

State: FLORIDA

Citation	Condition or Requirement
	<p>If an individual receives a title II benefit, any amounts attributable to the most recent increase in the monthly insurance benefit as a result of a title II COLA is not counted as income during a "transition period" beginning with January, when the title II benefit for December is received, and ending with the last day of the month following the month of publication of the revised annual federal poverty level.</p> <p>For individuals with title II income, the revised poverty levels are not effective until the first day of the month following the end of the transition period.</p> <p>For individuals not receiving title II income, the revised poverty levels are effective no later than the date of publication.</p>
1905(s) of the Act	<p>g. <u>Qualified disabled and working individuals.</u></p> <p>In determining countable income for qualified disabled and working individuals covered under 1902(a)(10)(E)(ii) of the Act, the methods of the SSI program are used.</p>

TN No. 92-23  
Supersedes  
TN No. 91-39

Approval Date OCT 13 1992 Effective Date 4/1/92



Revision: HCFA-PM-91-4 (BPD)  
AUGUST 1991

ATTACHMENT 2.6-A  
Page 12a  
OMB No.: 0938-

State: FLORIDA

Citation

Condition or Requirement

1905(s) of the  
Act

g. Qualified disabled and working individuals.  
In determining countable income for qualified disabled and working individuals covered under 1902(a)(10)(E)(ii) of the Act, the methods of the SSI program are used.

TN No. 91-39  
Supersedes  
TN No. NEW

Approval Date SEP 18 1992

Effective Date 10/1/91

HCFA ID: 7985E